

## **Secretary of State**

Professional Licensing Boards Division PO Box 13446 Macon, Georgia 31208 (478) 207-1460

## WATER/WASTEWATER WALL CERTIFICATE ORDER FORM

## **INSTRUCTIONS:**

If you would like to order the 8 1/2" x 11" Wall Certificate

- Please complete and return this form
- Type or print clearly
- Enclose \$25.00 fee (NON-REFUNDABLE); make check or money order payable to the **GA Water/Wastewater Board**

NAME		
MAILING ADDRESS		
CITY	_ STATE	ZIP
DAYTIME PHONE NUMB	ER	
CERTIFICATE NUMBER	DATE	ISSUED
•	•	cate was issued?YesNo
verifying legal name change.  PLEASE ALLOW 4		court order or other documentation  ROCESSING
verifying legal name change.	-6 WEEKS FOR PF  Date Ordered Date Returned Date Proofed	